10/086,117

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

T1-33887

CLAIMS AS FILED - PART I															
ΓŦ	OTAL CLAIM			(Column 1)		(Column 2)		SMALL ENTITY TYPE		OF	OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			18	18				RATE	FEE	٦	RATE	FEE			
FOR .			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 370.00	OF	BASIC FE	740.00			
Н		EABLE CLAIMS	/& n	/ & minus 20=		<u> </u>		- X\$ ⁻ 9≡		OF					
INDEPENDENT CLAIMS						•		X42=		OR	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
MULTIPLE DEPENDENT CLAIM PRESENT							I	.440	†	7					
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=		OR	L	24			
CLAIMS AS AMENDED - PART II								TOTAL		JOR		140			
_	(Column 1) (Column 2)						<u> </u>	SMALL	ENTITY	OR	OTHER SMALL				
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	- 19	Minus	- 2	20			X\$ 9=		OR	X\$18=	,,,,,,			
¥	Independent FIRST PRES	ENTATION OF M	Minus	PENDENT	3	-		X42=		OR	X84=				
				- CHOCH	ODAN		' [+140=		OR	+280=				
							_	TOTAL DOIT, FEE	-	OR	TOTAL				
_		(Column 1)		(Colum		(Column 3)	•								
AMENUMENT B		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	• 19	Minus	** 22	2	=		X\$ 9=		OR	X\$18=				
	Independent FIRST PRESE	NTATION OF ME	Minus	*** }	31 4434	=		X42=		OR	X84=				
			JEIN CE DE	CINDENT (- LAIM			+140=		OR	+280=				
	·							TOTAL		OR	TOTAL				
(Column 1) (Column 2) (Column 3)															
		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
-	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	155			
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<u>.''</u>	IRST PRESE	\vdash			OR OR										
H t	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT SEE										+280=				
11 1	na uiduezi Mat	nder Previousiv Pai	id For IN THIS	S SPACE ie ie	ce than	2		NT. FEE L		OR A	TOTAL DDIT. FEE				
_			"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												